AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2013

Administrator
Quiet Oaks
11311 SW 95th Circle
Ocala, FL 34481

Dear Administrator:

Re: CCR #2013006245

This letter reports the findings of a complaint survey that was conducted on . 2013 by a representative of this office.

Enclosed is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after . 2013 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure
XG90

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964742	07/03/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Quiet Oaks	11311 Sw 95th Circle Ocala, FL 34481	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)

List of Tags Cited:

St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced complaint survey was conducted at Quiet Oaks in Ocala, Florida on . 2013. The facility was not not to be in compliance .

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on interview, the facility failed to provide appropriate prevention training.

Findings:

Six out of seven staff interviewed failed to disclosure appropriate prevention procedures:

An interview was conducted with employee A at 2:58 PM in a private office. When asked, "What would you do if you saw a resident being yelled at, threatened, or treated poorly?" Employee A answered, "I'd first go to my supervisor Gail or Jim and if I didn ' t get a good response then call the hotline."

An interview was conducted with employee B at 3:15 PM on . 2013, in a private office. When asked, "What would you do if you saw a resident being yelled at, threatened, or treated poorly?" Employee B answered, "First, I'm going to do get really mad. I'm going to talk with that person, the administrator, and the RN."

An interview was conducted with employee C at 3:30 PM on , 2013, in a private office. When asked, "What would you do if you saw a resident being yelled at, threatened, or treated poorly?" Employee C answered, "I'd go to Gail ...administration."

Employee D was interviewed by telephone at 4:25 PM on , 2013. When asked, "What would you do if you saw a resident being yelled at, threatened, or treated poorly?" Employee D answered, "If had seen that I'd intervene and report it to the nurse and Gail and Jim. "When asked, "How are the Policy & Procedures changes disseminated to the residents, staff and families?" Employee D answered, "No, I don't know." When asked, "Who is the facility Coordinator?" Employee D answered, " No ...I don't know. When asked, "What would you do if you saw a resident become agitated and physically aggressive towards another resident? Employee answered, "Try to take the agitated resident to a safe place." When asked, "What is your responsibility if you witness something that might be considered "Employee D answered, "My responsibility is to report to my supervisor."When asked,"Do you know of any telephone number or any other mechanism in the state to report "Employee D answered, " No." When asked, "How is staff "burnout" potential recognized and monitored?" Employee D answered, "I don't know."

Employee E was interviewed at 4:45 PM in a private office on . 2013. When asked, "What would you do if

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you saw a resident being yelled at, threatened, or treated poorly?" Employee answered, "I would report it to my boss." When asked, "What would you do if you saw a resident become agitated and physically aggressive towards another resident?" Employee E answered, "I would try to diffuse the situation and if I could not I would get my When asked," What would you do if you witnessed a staff member being physically aggressive towards a resident?" Employee answered, "I would let my boss know."When asked, "What is your responsibility if you witness something that might be considered Employee answered,"To report it to my When asked, "Do you know of any telephone number or any other mechanism in the state to report Employee E answered, "You can call the ombudsman, can't we?"

Employee F was interviewed by phone at 5:50 PM on 2013. When asked, "What would you do if you saw a resident become agitated and physically aggressive towards another resident?" Employee F answered, "I would get a hold of the aggressive resident and try to calm down and make sure he doesn ' t hurt anyone."When asked, "What would you do if you witnessed a staff member being physically aggressive towards a resident? Employee F answered, "I would speak with staff, the resident, and make sure to call the and administrator." When asked, "What is your responsibility if you witness something that might be considered Employee F answered, "Make a note of it and if I really feel it is, I would call the and administrator and speak with the resident. Always call the chain of command."

Class III